

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KWT	32	10-92-01
O.I.P.E. CLASSIFIER	M.W.	1107	10/19
FORMALITY REVIEW		981-	11/02/01
RESPONSE FORMALITY REVIEW			3/19/02

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1-12-03
2	✓	✓	6-9-05
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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